FORM D

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UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number:

3235-0076

Expires:

April 30, 2008

Estimated average burden



07049491

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series A-1 Convertible Preferred Stock and the underlying Common Stock issuable upon conversi	on of such stock
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Silicon Space Technology Corporation	
Address of Executive Offices (Number and Street, City, State, Zip Code) 3620 Lost Creek Blvd., Austin, TX 78735	Telephone Number (Including Area Code) 512.891.9702
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices).	Telephone Number (Including Area Code)
Brief Description of Business	
fabless semiconductor technology	400
Type of Business Organization Corporation Ilimited partnership, already formed business trust limited partnership, to be formed other	er (please specify): THOMSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization: [0 2 0 4] Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for SCN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A received Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, due, on the date it was mailed by United States registered or certified mail to that address. Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually sign photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the information requested in Part C, and any material changes from the information previously supplied in Part with the SEC. Filling Fee: There is no federal filing fee. State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administr made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the propose filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of	notice is deemed filed with the U.S. Securities and if received at that address after the date on which it is gned. Any copies not manually signed must be the name of the issuer and offering, any changes thereto, is A and B. Part E and the Appendix need not be filed securities in those states that have adopted ULOE and ator in each state where sales are to be, or have been per amount shall accompany this form. This notice shall

are not required to respond unless the form displays a currently valid OMB control number.

Potential persons who are to respond to the collection of information contained in this form

A. BASIC IDENTIFICATION DATA	
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of the each executive officer and director of corporate issuers and of corporate general and managing partners of partnership is the Each general and managing partner of partnership issuers. 	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Morris, Wesley H.	
Business or Residence Address (Number and Street, City, State, Zip Code)	•
c/o Silicon Space Technology Corporation , 3620 Lost Creek Blvd., Austin, TX 78735	
Check Box(es) that Apply:	General and/or Managing Partner
Full Name (Last name first, if individual) Gwin, Jon	
Business or Residence Address (Number and Street, City, State, Zip Code)	•
c/o Silicon Space Technology Corporation, 3620 Lost Creek Blvd., Austin, TX 78735	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual) Subramaniam, Somu	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o New Science Venture Funds, 645 Madison Ave., 20 th Floor, New York, NY 10022	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
New Science Venture Funds	
Business or Residence Address (Number and Street, City, State, Zip Code)	•
645 Madison Ave, 20th Floor, New York, NY 10022	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	,
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	3

1				В.	INFOR	MATION A	ABOUT OF	FERING				
1. Has the	e issuer sold,	or does the is	cuer intend t	o sell to no	n accredited	invectore in t	his offering?	, ,			Yes	No ⊠
i. nasun	e issuei soiu,	or does are is	ssuer miteria i					ınder ULOE.		***************************************	ت	
2. What is	s the minimu	m investmen	t that will be	accepted fro	om any indivi	dual?	***************	***************************************			\$	<u>n/a</u>
3. Does ti	he offering pe	ermit joint ov	vnership of a	single unit?							Yes ⊠	No □
4. Enter t	he informatio	n requested f	or each perso	n who has be	een or will be	paid or giver	directly or	indirectly, an	y commissio	n or similar		
	eration for sol or agent of a						_	•				
than fir dealer	ve (5) persons only.	s to be listed a	are associated	1 persons of	such a broke	r or dealer, y	ou may set fo	orth the inform	nation for th	at broker or		
	Last name fir	st, if individu	ıal)									
Business or	Residence Ad	idress (Numb	per and Stree	t, City, State	, Zip Code)							
Name of Ass	sociated Brok	er or Dealer	<u> </u>	· · · · ·						· · · · · · · · · · · · · · · · · · ·		
States in Wh	nich Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers		-					
(Check "/	All States" or	check indivi	duals States)	***************************************		***************						ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[UJ]	[NM]	[NY]	[NC]	[ND]	[OH]	(OK)	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	· [PR]
Full Name (Last name fir	st. if individu										
										<u> </u>		
Business or	Residence Ac	ldress (Numl	er and Stree	t, City, State	, Zip Code)							
Name of Ass	sociated Brok	er or Dealer								. .	****	
States in Wh	nich Person L	isted Has Sol	licited or Inte	ends to Solic	it Purchasers					<u> </u>		
(Check "/	All States" or	check indivi	duals States)							****************	□ A	ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV] .	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (Last name fir	st, if individu	ıal)									
Business or	Residence Ac	idress (Numb	per and Stree	t, City, State	, Zip Code)		<u> </u>			· ·		
Name of Ass	sociated Brok	er or Dealer					·					
States in Wh	nich Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers						· · · · · · · · · · · · · · · · · · ·	
(Check "A	All States" or	check indivi	duals States)		***************************************	••••••	***************************************	***************************************			□ A	Il States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
			(Use t	lank sheet,	or copy and u	ise additiona	l copies of th	is sheet, as n	ecessary)			

OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Sold Offering Price Type of Security Debt..... \$<u>2,625,000.00</u> □ Preferred Common Total \$ 2,625,000.00 \$__2,625,000.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchase Investors Accredited investors \$_2,625,000.00 Non-accredited Investors Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees.... Printing and Engraving Costs Legal Fees \$ 185,000.00 Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) Total M \$___185,000.00

C. OFFERIN	NG PRICE, NUMBER OF INVESTORS, EXPENSES A	ND USE OF PROCEEDS	
total expenses furnished in response to Pa	egate offering price given in response to Part C - Question I art C - Question 4.a. This difference is the "adjusted gross		\$ <u>2,440,000.00</u>
the purposes shown. If the amount for any	gross proceeds to the issuer used or proposed to be used for a purpose is not known, furnish an estimate and check the bounts listed must equal the adjusted gross proceeds to the issue above.	x to the	
•		Payments to Officers, Directors & Affiliates	Payments To Others
Salaries and fees		, 🗀 \$	□ s
Purchase of real estate		🗆 \$	□ s
Purchase, rental or leasing and installation	n of machinery and equipment	🗆 \$	□ s
Construction or leasing of plant buildings	s and facilities	🗆 \$	□ s
Acquisition of other businesses (including used in exchange for the assets or securiti	g the value of securities involved in this offering that may be ies of another issuer pursuant to a merger)	be	□ s
Repayment of indebtedness	·	🛛 \$ 450,000.00	\$
Working capital			⊠ \$ <u>1,990,000.00</u>
Other (specify):			☐ \$
Column Totals		🛛 💲 450,000.00	⊠ \$ <u>1,990,000.00</u>
Total Payments Listed (column tota	ls added)	🛭 \$ 2,44	10,000.00
	D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed undertaking by the issuer to furnish the U.S. Secu accredited investor pursuant to paragraph (b)(2) or	by the undersigned duly authorized person. If this notice is file irities and Exchange Commission, upon written request of its s f Rule 502.	ed under Rule 505, the following staff, the information furnished (g signature constitutes and by the issuer to any non-
Issuer (Print or Type)	Signature	Date	
Silicon Space Technology Corporation		March, 2007	
Name of Signer (Print or Type) Wesley H. Morris	Title of Signer (Print or Type) President & Chief Executive Officer		
Trotto III Inoilis	Tresident & Ciner Executive Officer		
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	ATTENTION	•	
Intentional Misstatements	s or Omissions of Fact Constitute Federal Criminal Viol	lations. (See 18. U.S.C. 100	1.)

·	·		
	E. STATE SIGNATURE		
1. Is any party described in 17 CFR 230.20	52 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	See Appendix, Column 5, for state response.		
 The undersigned issuer hereby undertak 239,500) at such times as required by st 	es to furnish to any state administrator of any state in which this notice is filed, a notice ate law.	on Form D (17 CFR
3. The undersigned issuer hereby undertak	es to furnish to the state administrators, upon written request, information furnished by	the issuer to	offerees.
	he issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform this notice is filed and understands that the issuer claiming the availability of this exemple en satisfied.		•
The issuer has read this notification and know authorized person.	vs the contents to be true and has duly caused this notice to be signed on its behalf by the	e undersigne	d duly ·
Issuer (Print or Type)	Signature/ / Date		
Silicon Space Technology Corporation	March 26, 2007		
Name of Signer (Print or Type)	Title of Signer (Print of Type)		
Wesley H. Morris	President and Chief Executive Officer		

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		2	3		<u> </u>				;
	Intend in non-action investigation	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)						
				Number of Accredited		Number of Non- Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AL		<u> </u>				-			
AK	<u> </u>			<u> </u>				ļ	
AZ				 				<u> </u>	·
AR									
CA	ļ .								
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MD	 								
MA	<u> </u>				 				
MI				<u> </u>				<u></u>	
MN	 	<u> </u>							
MS	 				-				
MO	 			<u> </u>		 			
1410	<u> </u>	<u> </u>	<u> </u>	L	<u></u>		<u> </u>	<u> </u>	

1		2	3		4				5
	Intend non-acc	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investment amount purch: (Part C-l	estor and ased in State	÷.	under UL (if yes, explana waiver	ification State OE attach ation of granted -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE								_	
NV			·			·			
NH									
NJ									
NM									
NY		х	Series A-1 Preferred Stock \$2,625,000.00	5	\$2,500,000.00	0	\$0.00		х
NC									
ОН				···					
OK									•
OR									
PA									
RI			-			-			
SC									
SD									
TN									
TX		х	Scries A-1 Preferred Stock \$2,625,000.00	2	\$125,000.00	0	\$0.00	_	х
UT									
VT					•		·		
VA									
WA									
WI				_ .					
WY									
PR					·				

